FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P97000022045 (3)

THE NATIONAL SEAFOOD ASSOCIATION, INC.

FILED May 07 1998 8:00am Secretary of State

Suite, Apt. 22 City & Stat 23 Zip	LANE NE FL 33149 lace of Business #, etc.	Stude, Apt #, etc 27 City & State 28 AUAM)	63	. A ·	DO NOT WRITE IN THE 3. Date Incorporated or Qualified 03/05/1997 4. FEI Number 6. 5 - 074 2592 5. Certificate of Status Desired 6. Election Campaign Financing 1 rust Fund Contribution	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees current year Intangible	
24	[25] 9. Name and Address of Cur	rent Registered Agent	30 0.2	· • • · · · · · · · · · · · · · · · · ·	Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No	
DRUCKMAN, ERIC 155 OCEAN LANE STE 1204 KEY BISCAYNE FL 33149			82 63		ldress (P.O. Box Number is Not Acceptable)		
			84	City	F	85 Zip Code	
office or r	to the provisions of Sections 607.6 egistered agent, or both, in the St m familiar with, and accept the ot	ate of Florida. Such change was	authorized by t	named corpo he corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the a	of changing its registered	
SIGNATURE							
12.	Signature Typed or product name of registered Or ELECT LIST	Ingentiand telephapphable (NC AND DIRECTORS	III: Registered Agent 13.	signature require	d when reinstaining) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 THLE	ه ا		Change MAddition	
NAME	DRUCKMAN, ERIC	tuni	1.2 NAME				
STREET ADDRESS	155 OCEAN LANE		1.3 STREET AL	DORESS		8	
CITY-ST-ZIP	KEY BISCAYNE FL 33149		1.4 CITY - ST -			K	
TITLE		☐ DELETE	2.1 TITLE			☐ Change ☐ Addition C	
NAME			2.2 NAME				
STREET ADDRESS			2 3 STREET AT	DORESS			
CITY-ST-ZIP			2 4 CITY · ST ·	- ZIP			
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NAME			3.2 NAME			İ	
STREET ADDRESS			3.3 STREET AL				
CITY-ST-ZIP TITLE		DELETE	34. CITY-ST-	ZIP		Change Addition	
NAME		רַ טננוונ	4 1 HILE 4 2 NAME			Change Addition	
STREET ADDRESS			4 2 NAME 43 STREET AS	OUBESS			
CITY-ST-ZIP			44 CITY - S1 -	- 1			
TITLE		DELETE	5 1 TIFLE	•		Change Addition	
NAME			5 2 NAME				
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CITY-ST-ZIP			5 4 CITY-S1-				
TITLE		DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET AC	DDRESS			
CITY-ST-ZIP		,	6 4 CITY- ST-				
14. I hereby o	certify that the information supplied	t with this filing does not qualify	for the exemptic	on stated in S	Section 119.07(3)(i), Florida Statutes. I further	certify that the information	

il report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a trustice empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

APRIL 70 1998